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AN ACT TO INCORPORATE THE GRADUATE NURSES OF ALBERTA

(Assented to April 19, 1916.)

His Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Alberta, enacts as follows:

Title

1. This Act may be cited as "The Registered Nurses Act."

Incorporation of Association

2. Eleanor McPhedran, Lilian Armstrong, Lottie M. Edy, Martha E. Morkin, Mary Patterson, Edith Rutherford, Margaret Walsh, Lottie Hunter, Agnes Hurcomb, Hester McKay, Sara Kingston, Victoria Winslow, and such other persons as are or may hereafter become members of the said association, are hereby constituted a body corporate under the name of "Alberta Association of Graduate Nurses" (hereinafter called "the association"), and by that name the said corporation shall have perpetual succession, and a common seal (which it may at pleasure change), and may sue and be sued, contract and be contracted with, and may acquire by gift, purchase or otherwise, and may sell, mortgage, lease or otherwise dispose of real and personal property for the purpose of carrying into effect and of promoting the objects and designs of the said corporation, and may expend money in prosecuting violations of this Act, and may pass by-laws not inconsistent with this Act for the government and discipline of its members, the management of its property, the registration and admission of members, and all such purposes as may be deemed necessary for the management of the association, and the promotion of its welfare, and may issue registration certificates.

Membership

3. Every person who on the coming into force of this Act is a graduate nurse from a general hospital giving at least two years' training in medical, surgical and obstetrical work, and who is a resident of the Province of Alberta, shall be entitled to be enrolled as a member of the association, upon paying the registrar a registration fee of $10, and upon producing evidence satisfactory to the registrar that he

MEDICAL FACULTY McGILL UNIVERSITY

or she is a graduate nurse; provided, however, that the fee for registration under this section shall be twenty dollars unless registration takes place before the first day of January, 1917.

4. From and after the 1st day of January, 1917, every applicant for membership, not qualifying under the next preceding section, in addition to complying with the requirements of said preceding section, must pass such examination as shall be provided for by the Honourable the Minister of Education of this province and the said Minister shall appoint the examiners and shall prescribe the regulations governing such examination. The examiners shall be selected from the physicians practising in this province, and from the members of this association.

Management

5. The affairs of the association shall be managed by a council (herein referred to as "the council") consisting of seven members, all of whom shall be members of the association and who shall be elected every second year.

Election of Officers

6. Elections shall be conducted by the registrar; Eleanor McPhedran, of the City of Calgary, shall hold office of the registrar from the coming into force of this Act until the first day of July, 1916, and until her successor in office shall be appointed, and she shall have the management of the first election. Eleanor McPhedran, Lilian Armstrong, Lottie M. Edy, Martha E. Morkin, Mary Patterson, Sara Kingston, and Victoria Winslow shall be a pro tem council of the association until the first day of July, 1916, or until their successors are appointed. Unless the council pro tem organizes and makes other appointments the said Eleanor McPhedran shall perform the duties of secretary and treasurer until the first council elect makes regular appointments to these offices.

7. The first election shall take place on the 20th day of June, 1916, and subsequent elections shall take place every second year thereafter at such place, and on such date as the council by by-law or regulation may determine, and the first council elect shall take office on the first day of July, 1916.

8. Every member of the association in good standing, resident in the Province of Alberta, shall be eligible for election to the council.

9. Every member of the association in good standing shall be entitled to vote at any election for members of the council, and may vote for not more nor less than seven persons, and in the event of any elector placing more or less than seven names on his or her voting paper, it shall not be counted.

10. At least two weeks prior to the holding of the election the registrar shall make out a list of the names and addresses of the mem-

bers of the association, who are entitled to vote at such election, and transmit a copy of such list by post to each member whose name appears thereon.

11. In case any member complains to the registrar at least one week before the election, of the improper omission or insertion of any name on the list, it shall be the duty of the registrar forthwith to examine into the complaint, and rectify such error, if any there be.

12. No persons whose name does not appear on the said list as amended, if so be, shall be entitled to vote at such elections.

13. At all elections retiring members of the council shall be eligible for re-election.

14. No person shall be entitled to vote or to be elected unless all fees and other moneys owing by him or her to the association have been paid before the day of election.

15. Each voter shall vote by ballot, using the form A in the schedule to this Act (or a form to the like effect) and may mail the same in a sealed envelope, marked "Ballot" postage prepaid, to the registrar, or may deliver the same, to him or her, so that the registrar may receive the same before the hour prescribed for opening the voting papers.

16. The said voting papers shall at the hour of eleven o'clock in the forenoon, of the day of the election, at the time and place appointed for the holding of the said election, be opened by the registrar, in the presence of any of the persons entitled to vote, who may attend, and the registrar shall then scrutinize and count the votes, and keep a record thereof.

17. In case of an equality of votes between two or more persons which leaves the election of one or more persons undecided, then the registrar shall cast another ballot so as to break the tie.

18. The seven members receiving the highest number of votes shall constitute the council for the next ensuing two years, and until their successors are appointed; and the registrar shall forthwith after the election notify the members elect of their election. Any vacancy occurring in the council between elections shall be filled by the council from the members of the association.

19. The voting papers relating to any election shall not be destroyed, but along with all other papers relating to the election shall be retained by the secretary, until all petitions relating to such election have been decided.

20. In the event of any dispute as to the election of all or any of the persons declared by the registrar to have been elected to the council, the same may be decided in a summary way by any judge of the Supreme Court of Alberta upon petition presented within ten days from the declaration of the result; the decision of the judge shall be

final, and the costs of the petition shall be in his discretion. The judge shall in and about such petition have the powers of a judge in Chambers upon the hearing of a summons in an action pending in such court.

21. No person shall sign the name of any other person to any voting paper, under this Act, or alter or add to or falsify or fill up any blank in any voting paper signed by another person.

22. In the event of there being no registrar (for the time being) of the association, at the time at which any election under this Act is to be held, or in the event of such registrar being unable from illness or other unavoidable cause to act at such election, then and in such case the president for the time being of the association shall appoint under his or her hand, some other person to act as registrar; and such person so appointed shall perform all the duties of such registrar as prescribed by this Act.

23. It shall be the duty of the council to make such by-laws and regulations, not inconsistent with this Act, as may best promote the interests of the association, and from time to time to amend the same as in their judgment seems wise.

Officers of Association

24.—Each council elect shall at its first meeting, from among the members of the council, appoint the following officers, namely: President, first vice-president, second vice-president, secretary, treasurer and registrar; provided, however, that any appointee may hold the position of the three last mentioned offices or any two of them.

24a. The first council elected shall, at the call of the secretary, meet in the City of Edmonton not later than the 31st day of July, 1916.

25. In the case of the absence or inability of the president, the first vice-president, or in case of his or her absence or inability, the second vice-president, shall act instead of the president.

26. The council shall cause to be kept by the registrar a book or register to be known as "The Alberta Nurses Register" (herein called "the register") in which shall be entered the name of every member of the association.

27. A majority of the council duly convened shall constitute a quorum for the transaction of business.

Funds of Association

28. All fees, dues and subscriptions payable under the provisions of this Act shall be the property of the association and shall be paid to the treasurer of the association.

29. The funds of the association shall be deposited by the treasurer to the credit of the association in a chartered bank, and shall be withdrawn only by cheque signed by the treasurer and countersigned by the president, or in his absence one of the vice-presidents.

30. The funds of the association shall be disbursed and appropriated under the direction of the council.

Certificate of Registration

31. Every member of the association shall pay to the treasurer, or to any person deputed by the treasurer to receive it, the sum of two dollars as a membership fee, for the remainder of the present calendar year, and thereafter on or before the first day of January in each and every calendar year shall pay such annual fee as may be determined upon by the council, but which fee shall not be less than one dollar and not more than five dollars. Upon the payment of the said fee each member shall be entitled to receive a certificate, under the seal of the association, stating his or her qualifications to hold himself or herself out as a registered nurse, and that the certificate is in force for the remainder of the calendar year in which it is issued, and no person shall be entitled to use the letters "R.N." unless and until such fee is paid; provided always that any member of the association shall, in writing, notify the treasurer that he or she desires to discontinue nursing in this province for a definite or indefinite period, and during the said period the member shall not be required to pay the annual fee to redeem his or her membership in good standing. Any member so serving such notice shall be entitled to practise his or her profession at a later period, by notifying the treasurer of his or her intention to so practise, and paying the fee for the year in which such notice is given.

32. Every member of the association shall be entitled to practise professional nursing in the province of Alberta and to append to his or her name the letters "R.N." showing that he or she has been registered in accordance with this Act.

33. The council may revoke any certificate by an unanimous vote for dishonesty, a habit rendering a nurse unsafe to be trusted with or unfit for the care of the sick, conduct derogatory to the morals or standing of the profession of nursing, or any wilful fraud or misrepresentation practised in procuring such certificate, or the fraudulent use of the certificate; provided the holder of such certificate shall have been given at least thirty days' notice in writing of the specific charge against such holder, and of the time and place of the hearing of the charge by the council, at which time and place the holder shall be entitled to be heard, and be represented by counsel. Upon the revocation of any certificate the same shall be null and void, the holder thereof shall cease to be a member of the association and cease to be entitled to any of the privileges conferred by such certificate or registration, and it shall be the duty of the registrar to strike the name of the holder thereof from the roll of registered nurses.

Prohibitions and Penalties

34. Any person not registered pursuant to this Act who takes or

uses the title of registered nurse or the abbreviation "R.N." or any other words, letters or descriptions calculated to lead people to infer that such person is registered under this Act or is recognized by law as a registered nurse, shall be liable upon summary conviction to pay a penalty of not less than ten dollars and not more than fifty dollars.

35. Any prosecution under this Act may be brought and heard before a police magistrate or a justice of the peace. In case the penalty and costs awarded are not upon conviction forthwith paid the justice may commit the offender to the common gaol, there to be imprisoned for any time not exceeding one month, unless the penalty and costs are sooner paid.

36. In any prosecution under this Act, the certificate of the registrar shall be prima facie evidence as to whether or not the person charged is registered under the provisions of this Act.

37. Every prosecution under this Act shall be commenced within twelve months from the date of the alleged offence.

Schedule A—The Graduate Nurses Association of Alberta

I, ... of ..... in the Province of Alberta, ..., do hereby declare:

1. That the signature hereto is my proper handwriting;
2. That I now reside at .....;
3. That I vote for the following persons as member of the Council of the Graduate Nurses Association of Alberta:

..... of .....
..... of .....
..... of .....
..... of .....
..... of .....
..... of .....
..... of .....

4. That I have signed no other voting paper at this election;
5. That this voting paper was executed on the day of the date hereof.

Witness my hand this ..... day of ..... 191.....

.....

Witness:.....

THE MOTHERS' CLUB OF HESTER HOW SCHOOL

By E. J. Jamieson

Two years after medical inspection of Public School children had been instituted in Toronto, an attempt was made to have a "Mothers' Meeting" at Hester How School.

The school nurse felt keenly the need of some means of reaching

the mothers of this district which is composed almost entirely of the Jewish people. True, there were home calls, but when mother and the school nurse speak a different language and have to depend on a poor interpreter, results do not come quickly.

A medical inspector was appointed to Hester How School who could speak to these people in their own language, and a way was opened for more definite effort. The Chief Medical Inspector and School Nurse consulted together and decided to have a "Mothers' Meeting." An invitation was sent to the homes of the children attending the school, asking the mothers to come to the school at four o'clock Tuesday afternoon. The programme consisted of addresses in Yiddish by a physician and dentist, and a short talk by one of the Hebrew ladies who had provided glasses for some of the needy children. The School Nurse served Russian tea, fearing to offer any other refreshment, lest some might not like to partake. Thirty mothers attended and we had an opportunity to shake hands and become a little nearer to understanding each other.

Two or three such meetings have been held annually since—and through the kindness of a committee of Hebrew ladies, who offered to bring refreshments and assist in serving, helpful social hours have been spent. Altogether the coming together has been productive of good in getting the confidence of the parents. There is less difficulty in getting a signed permission allowing Morris to go to the dentist, or Leah to have her eyes tested. Many of the parents come of their own accord to consult with the medical inspector and school nurse and are much more willing to follow the advice given. Still we need more earnest, intelligent co-operation from the parents to obtain the object aimed at by medical inspection.

The mothers need teaching and advising, so they may help the children come to the standard the public school requires of them.

The children become Canadianized readily, but the mothers like "the old way" and this attitude presents many hindrances to the child's well-being and development.

Realizing that a few scattered meetings in a year cannot bring great results, a Mother's Club was organized in May of last year. A committee of Hebrew ladies have offered to assist in this organization. The club will be managed entirely under the direction of the Principal of the School and the School Nurse. Meetings are being held monthly.

The purpose of the Club is to try to teach the mothers how to care for their homes and their children; why the use of the tooth brush is necessary for the Kindergarten child as well as for the older ones; to show them why Rachel should not leave school just because she is fourteen years of age, when possibly, she has been attending school

only one year and has not learned enough English to fit her to earn her own living; in short, to try to enable them to appreciate the opportunities Canada offers their children.

At the annual meeting held last month, Dr. Fauman spoke to the mothers on the hygiene of pregnancy, care of mother and babe at time of birth, care of the child during the first two years of life, with emphasis on the care during the first two summers.

Judging from the manifest interest and the questions asked the speaker at the close of the address, we are hoping for more intelligent care of some of the babies in the coming months.

THE PRACTICAL NURSE QUESTION—A TWO-YEAR'S STUDY IN DETROIT.

By Charlotte A. Aikens, Detroit.

Since the beginning of 1914 the Detroit Home Nursing Association has been making a study of the best means of managing the practical nurse question in Detroit. The records of service given in more than 1,000 homes are on file and a large amount of information relative to the general situation has been secured. Backed by a group of representative medical men of the city, by superintendents of larger hospitals, and by leading citizens, the effort has been made to build up for service in homes of families of moderate means, a corps of reliable workers who would work under the direction of graduate nurses' supervisors to whom they might appeal in any time of doubt or emergency. The aim has been to send to each home calling for assistance the kind of nurse best fitted to the needs of that home, to safeguard the interests of the home and of the worker—in short, to give an all-around, practical form of nursing service for such homes at the lowest expense possible with justice to the worker.

Of the value of the household or practical nurse in certain classes of cases and conditions there is little dispute. In the cases in which the patient can be considered separate from her home and family, a graduate nurse should be called. But in a large majority of cases not the patient alone but the home needs to be cared for, and the woman who besides caring for the sick is willing to get meals, keep the house in order, see that the man's dinner pail is gotten ready, and the children washed, dressed and off to school, is in demand and will continue to be in demand. How to increase her efficiency and minimize the difficulties under which she labors has been made a subject of special study in Detroit during the years 1914 and 1915.

Two important difficulties exist in regard to this class of workers from the standpoint of the public. First, the practical nurse is (often through no fault of her own) pressed into service on critical cases

where a high degree of nursing skill is needed. Second, the tendency with many practical nurses is to unduly increase the price for their service. From the standpoint of the practical nurse herself, the difficulty in many homes is that the family resolves to get all the work possible out of her. They plan for unusual and unnecessary labor to be done during the sickness; often they make no provision for needed sleep and too many times they expect her to wait months for her money. It is often found that the household nurse who is caring for a sick mother and perhaps a baby besides, will be expected by some relative, to do the housecleaning in her "odd moments," to do large washings, to scrub carpets, and do various other kinds of work which should never be expected of her. No woman can do such work in a home without neglecting the patient, who should be the first consideration. Many complaints about neglect of the patient arise from this cause. Thus it is that the superintendent of the association providing such service becomes in many cases an adjuster of domestic conditions—always insisting on the patient's interests being placed first, and the housework being limited to duties which are essential to be done for the comfort of the household.

During the two years' study of this situation 403 women have applied to the Detroit Home Nursing Association, asking to be placed on their list of workers. Out of this number, the superintendent accepted 107. Of these 27 were rejected after a trial, leaving a staff of 80 household nurses at the beginning of 1916. Since that date several new workers have been added to the accepted list.

The reasons for the rejection of the 27 who seemed to have in them the possibilities of becoming fairly good workers and who brought with them excellent recommendations, are in general as follows: Some were habitually untruthful, and, therefore, unreliable. This fault was frequently discovered in those whose recommendations were of the best. Others were "gossipy"—could not control their tongues, discussed physicians and the association promiscuously and had no idea of loyalty to anybody. The little unruly member is difficult to deal with in pupil nurses and even in graduates who have had a three-years' training—every one familiar with the situation knows this. It is still more of a problem with the untrained woman, in spite of all the instruction and warning the superintendent could give. Others had "men followers"—too many of them, who were taking then from their work for long telephone conversations—to the neglect of the patient, or who called for them in the evenings and brought them back after midnight, unfit to give efficient service to the patient and family next day. They were, in the main, young women who were capable of giving fairly good service but for these personal failings.

The 296 who were rejected without trial were rejected for the following reasons:

1. A large proportion of them were found on careful questioning to have no serious intention of staying in this line of work for any length of time. They were simply taking it up as a temporary "tideover" till they found some job better suited to their liking. Many of them were "canvassers" who did not like to be out canvassing in cold weather, and who did not wish to be in the sickroom in warm weather. They had no desire to become efficient in this work.

2. A considerable number objected to the superintendent insisting that they must not wear white dresses while on duty, and must have a supply of colored working aprons. They wished to copy the graduate nurse as far as possible. They wished to be called "trained nurses" and they refused to do housework. Many of this class were rejected probationers from hospital schools.

3. A large number objected to the association fixing the rates for service. They spurned the idea of working for $2 a day or less and demanded $20 to $25 a week when they made their own charges.

4. Others were too profuse in their own praise. They had had perhaps one or two cases, and felt equal to the most difficult situations. Their self-confidence condemned them as unteachable and dangerous—the type who would not hesitate to prescribe for a patient without bothering to ask the doctor about it.

5. A number of these applicants presented themselves dressed to resemble a Paris doll—face painted and powdered, tawdry finery, sham jewelry in the shape of bracelets, ear-rings, lavallieres, hair ornaments, etc.

6. A considerable number of women—especially those who had had some experience in the care of the sick, objected to being supervised by a graduate. They knew too much to be desirable workers.

7. Many who applied were not neat or clean in their habits or dress. A careful scrutiny showed lack of cleanliness about clothing, neck, ears, hands, etc. Judging from the odor of perspiration which they exuded, they were badly in need of a bath and a clean set of underclothes. Some of this class who seemed otherwise promising, were given a trial in the hope that if they were given a chance for regular baths, etc., their habits would improve in this respect.

8. Several presented themselves as applicants with the odor of intoxicating liquor on their breath.

9. Some had disagreeable physical defects—nasal catarrh, "running ears," etc., and a few applied whose appearance suggested the possible presence of serious specific disease.

10. The others might be grouped as "doubtful characters." They were most insistent that they be promised their hours off-duty

at night. A little probing showed that they were fond of public dance halls and that the hour at which they arrived at the home of their patient after the dance did not matter, in their estimation.

Of the 403 applicants, six had had a correspondence course in nursing of some kind. Two of the six were given a trial. Both were women of good character who seemed to have possibilities of usefulness in some way in this field. One was a nice, refined elderly woman whom the superintendent thought might fit in, in certain places where there was no night work and nothing very difficult to deal with. She had paid one hundred dollars for the course she had taken from a correspondence school. She was too old to learn a new occupation of any kind, and unable to apply such knowledge as she had acquired, so had to be dropped after one trial case.

The other was a young woman of perhaps thirty years of age who seemed intelligent and promising. She might have succeeded without the correspondence course, but was too full of theories to succeed after she had it. Few cases in homes can be managed according to "the books" or according to theories as to how they should be handled. She lacked discipline, was "self-opinionated," resented directions from the superintendent, and did not seem to get along without friction in any home to which she was sent. She was dropped after a fair trial.

About 200 of the 403 applicants had had some experience in hospitals. Some had worked in a sanitarium of some kind, but a large number—in fact, most of them not accepted—were rejected probationers from hospitals in Michigan, Ontario, and adjacent states. Some very good applicants had been obliged to interrupt their training course in a hospital for family reasons and circumstances made it necessary for them to earn money at once. Inquiry at the hospitals from which several of these applicants came showed that their general record there had been good, and in some cases the hospital expressed the desire to have them return to complete their training.

The rejected probationer is by all odds the most difficult type to deal with. She has been long enough in a hospital to acquire certain habits, overestimates her worth, objects to housework, wants to wear white dresses on duty and be called a "trained nurse," and is generally insubordinate. The same qualities which unfitted her for continuing her hospital course unfit her for household nursing. A large number of this class kept prominent the stipulation that they be promised "hours off" at night. Most of them wanted from $20 to $25 a week for their services.

The experience of the association with this class of applicants has confirmed them in the belief that for those who desire to devote themselves to nursing in homes of moderate means the best to

train is in the home supplemented by class work and weekly conferences with the superintendent, such as are carried on throughout most of the year.

In the list of those accepted as workers are many splendid women. A large number of them are of mature age with experience in the management of a home and children. To them, life is a serious thing. They have to "make good." Many are widows who have learned in the school of life much which the young graduate has yet to learn. They are careful to obey orders, eager to increase their efficiency, economical in the management of household affairs and give a large measure of willing service. Many of them are refined and intelligent—women who can be sent to a home with confidence that they will try to keep up the standard of service with the protection which it affords them. They are quick to send in a call for the supervisor to come to assist them when in difficulty, and careful to try to observe the instructions given. Experience has proven that the graduate and the practical nurse can work together harmoniously, each doing that which she is best fitted to do, and both striving to render to the sick of moderate means, prompt and efficient service. —*The Detroit Medical Journal.*

GLEANINGS.

Dr. William E. Chenery, professor of laryngology at Tufts, and chief of the nose and throat staff at the Forsythe Dental Infirmary, speaking the other day at the latter institution on "The Causes and Effects of Mouth Breathing and the Necessity of Nasal Respiration," denounced the practice of giving pacifiers to children, and also warned against lip-biting and thumb-sucking. The lecture was addressed to an audience composed entirely of teachers of special classes in the Boston public schools and social service workers.

"Mouth breathing may be laid to a number of different causes," said Dr. Chenery. "One of the most common is adenoids. The latter are a source of nuisance anyway, and so far as their use to the body is concerned might just as well be removed. The operation is a simple one and performed by a responsible person while the child is young, is practically devoid of all dangers. Swollen merely through a cold or similar cause, they are better left alone, but if the openings or air channels become clogged with foreign matter, then they should be removed.

"Should an operation become necessary, however, it should be complete. There is no sense in simply cutting off the parts visible in the mouth and letting it go at that. The same is true in an operation for tonsils. The cutting off of the heads of either is a menace to the general health of the patient, and lays him open to infections that might result in rheumatism, neuritis and other systemic diseases. The

ideal operation is a surgical one and means the cutting out of the entire tonsil and its capsule.

"Head colds should never be treated lightly. A continued attack leads to chronic catarrh and to hundreds of other dangers that only the finest of treatment can overcome. Children just over an attack of scarlet fever need special watching to prevent deafness. At the first sign of trouble, probably a flow from the ear or an earache, the ear drum should be cut in a circular cut with a quick motion and the pus or other secretion removed. The best preventive for any of the latter diseases is a clean mouth and teeth, for it is in the dark, moist and warm cavities that most diseases of the body develop. In fact, health itself depends largely on using the nose and mouth properly and in keeping them clean at all times."—*The News Letter.*

THE CANCER PROBLEM

Cancer is now recognized as being one of the most dangerous and unfathomable diseases ever known.

The most skilled physicians have made a deep and scientific study of the disease for many years and yet no tangible progress has been made, and at the present time no more is known about its fundamental cause, or its cure, than a hundred years ago.

There are only two possible remedies now recommended by the medical profession: one is to destroy the diseased tissue by the use of radium, X-ray or heat, and the other is to remove it by a surgical operation in its earliest stages, and even then these treatments seldom secure a permanently favorable result, except in the earliest stages and in certain varieties.

When the disease is far advanced, either of these treatments may result in very serious after effects by the poison being conveyed through the blood circulation to other parts of the body where there may be a certain form of unhealthy tissue, which would furnish just the proper medium for its continued development.

It is, therefore, a matter of profound satisfaction that the master minds in research work the world over are centering their efforts in this direction more intensely than in any other, and ere long a cure will surely be found.

As the disease often is not cured by medical treatment, and is seldom permanently cured by any surgical operation, it is quite evident that the medical profession will have to include entirely new lines of research in order to meet with a substantial success.

Medical statistics show that during the year 1915, in the United States, 80,000 deaths resulted from this disease and of this number 67,000 were over 45 years of age.

The highest medical authorities have finally decided that cancer does not result from a germ of any kind but from some unknown form of bodily poison which starts and spreads through unhealthy or diseased tissue suited to its propagation, and ultimately destroys that tissue. Another point on which they agree is that the disease is not hereditary or contagious. This information will greatly relieve the minds of many thousands of people who, if the disease has previously existed in any branch of their family, are in constant fear of it, which very thought is a powerful factor in helping to create a cancerous condition. It has also been decided that the fundamental lesion may be present in the body for many years before the disease becomes fully developed, or the person is aware of its presence.

Perhaps the following suggestions may be worthy of consideration.

Without the mind, the body is only material matter, and therefore its conditions are largely, if not entirely, under the influence of the mind. If the medical profession will make a thorough scientific study of the relations between the mind and body, they will soon discover the fundamental cause of many diseased conditions which are at the present time a mystery.

Good thoughts induce good health; but bad thoughts, such as worry, fear, hate, spite, never fail to leave an injurious effect on the body by weakening the whole nervous system; and intense, long continued fear often attracts into manifestation the thing so dreaded.

It is impossible for cancers, tumors, tuberculosis, or any form of ulcerations to occur in any part of the body unless unhealthy or diseased tissue is present to form the necessary base for their propagation.

It is also impossible for said tissue to become diseased or unhealthy unless the nerves supplying life and action to that particular part of the body have first become impaired, so that they are unable to fulfill their natural functions.

As the mind is the only power which can overstrain or weaken the nervous system, it is reasonable to suppose that we must first study the action of the mind over the body before we can discover the real fundamental cause of any inflammatory or malignant form of disease.

Fear and worry are synonymous, and inseparable in a person's mind. Therefore, fear is really the fundamental cause of many diseases, and the various forms of such depend largely on what particularly harmful thoughts are combined with fear in each patient.

If the medical profession fail to solve this difficult problem, it is possible that some "layman," who has given much thought and study to the subject, and experimented on scientific lines, may ultimately succeed in demonstrating the fundamental cause, and if it can be ac-

complished, then much of the mystery of all diseases will disappear and health and happiness will be much more general than at the present time.—Cyrus L. Topliff.

The Modern Hospital gives an interesting resume of the New Orleans convention:

The New Orleans convention of 1916, at which were registered over 600 delegates representing thirty-nine states, will, we believe, stand out as one of the most important gatherings of the three national organizations of nurses. From the opening meeting at the Athenaeum on April 27, when the organizations were most graciously welcomed by Mr. Newman, commissioner of public safety, and Miss Gillespie, the president of the Louisiana State Nurses' Association, and when Mr. Rosen, of the board of the Touro Infirmary, gave his interesting address on the "Influence of Laws Regarding a Profession on the Profession Itself," until the last night, May 3, when, under the auspices of the National League of Nursing Education, Dr. Rudolph Matas, of the department of surgery, Tulane University, most sympathetically and comprehensively presented the growth and expansion of nursing education that had definitely placed nursing among the professions, and Dr. Brandt Dixon, president of Sophia Newcomb Memorial College, gave his scholarly address on the higher education of women and its relation to the education of the nurse, the interest of the members in the comprehensive and varied programme never abated.

Questions of no small moment were presented and received the favorable consideration of the members of the three organizations where they were jointly concerned, or of the individual organizations where the matters pertained only to that particular body.

The most important changes determined on were the incorporation under a national charter, biennial meetings, and the adoption of the delegate convention system of representation. That changes of such consequence could be accepted was due to the very efficient work and clear presentation of the subject of the revision committee under its able chairman, Miss Sarah E. Sly.

The acceptance of the by-law providing for the formation of sections brought into immediate existence a section on private duty nursing with Miss Ott, of Indiana, as chairman, and a mental hygiene section, with Miss Elnora Thompson, of Chicago, as chairman.

The Advisory Council, which is composed of the boards of directors of the American Nurses' Association, the presidents of the state associations or their representatives, and the chairmen of sections, promises to be a very valuable body through which to reach the nurses at large. Many of the questions of importance were presented to this body for consideration and recommendation before being presented to the delegates.

The Bureau of Legislation, under Miss Mary C. Wheeler, of Chicago, presented its revised list of schools of nursing accredited by state boards of nurse examiners, and also the list of registered nurses by states. This list showed the total number of registered nurses in the United States, at the date of the issuance of this pamphlet, to be 70,218.

The work of the so-called Subcommittee on Legislation, with Miss Anna C. Jamme, director Bureau of Registration of Nurses, State Board of Health, Sacramento, Cal., as chairman, had so increased in scope that it was decided to make this a separate committee and to refer to it all questions concerning the statutory control of the practice of nursing and nursing education. It is hoped that through this committee a greater uniformity in state laws and state curriculums may be encompassed.

The legislative session was one of the most interesting sessions of the convention, and at it papers were presented by Miss Eyre, of Colorado, on "Standardization of State Requirements for Training Schools for Nurses;" by Miss Hilliard, inspector of nurse training schools in New York state, on "Methods of Inspection;" and by Dr. C. A. Bohn, of New Orleans, on "The Present and Future of Reciprocity." In addition to his most interesting and suggestive paper, Dr. Bohn presented at the round table following this session his exceedingly comprehensive schedules for inspection and accrediting of schools.

Two papers of unusual interest and importance were those presented by Dr. M. Evangeline Jordan, of Los Angeles, Cal., on "The Care of the Mouth During Pregnancy," and by Assistant Surgeon C. V. Akin, of the United States Public Health Service, on "Plague Eradication and Prevention in New Orleans."

The evening devoted to Red Cross work was a notable one. Miss Delano reported that over 600 nurses were serving on the state and local Red Cross nursing committees that had been organized in every section of the United States since the affiliation of the American Nurses' Association with the American Red Cross nearly seven years ago, and that the total enrollment of Red Cross nurses is now 6,200. She gave a most illuminating account of the assistance that has been rendered by the Red Cross in our own country, as well as of the work that has been done in Europe during the war, stating that units had been maintained in England, France, Belgium, Germany, Austria, Russia, and Servia, and that 255 nurses had been sent over. It was of special interest to learn at this meeting that Louisiana was among the first states to appoint committees on Red Cross nursing service, with Miss Emma L. Wall as chairman of the first committee. It is also interesting to note that the first applications for enrollment as Red Cross nurses received in Washington came from New Orleans, and to New Orleans also be-

longs the credit of having called out for relief work the largest proportion of their total enrollment of any committee. During the Mississippi floods in 1911 the Louisiana committee was asked to send nurses to aid in relief work and nearly one-half of the total enrollment responded.

Dr. Dowling, president of the Louisiana State Board of Health, followed Miss Delano with his interesting paper on "The Red Cross Nurse in Time of Disaster." Miss Babb, of Greenville, S.C., presented a charming paper entitled, "How a South Carolina Community Provides for Sanitary Inspection," while Miss Gladwin's simple, but most pathetic, story of her tragic experience in Servia will not soon be forgotten.

This is but the briefest and barest outline of a convention that cannot fail to bear fruit in many fields. For the most unusually interesting programme, every detail of which was carefully scheduled, the organization were indebted to Miss Martha Russell, of New York, and Miss Effie Taylor and Miss Mary Lent, of Baltimore.

The organizations also feel deeply indebted to Miss Emma L. Wall, and to Miss Daspit, her assistant, as well as to their associates, for the efficient way in which the entire convention was managed and the unceasing thought that was given to the comfort, pleasure, and even the health of those in attendance. Groups of student nurses acted as ushers throughout the proceedings and carried messages to and fro. Through the Federation of Women's Clubs and Dr. Barr, of the Young Men's Christian Association, a very beautiful musical programme was provided for the mass meeting on Sunday and for the social hours. A most restful and delightful break in the deliberation of the sessions was the beautiful river trip provided by the sisters of Charity Hospital and of the Hotel Dieu. On the day after the convention Sister Stanislaus, superintendent of Charity Hospital, arranged for a visit and personally conducted a group of remaining nurses to the leper colony.

A full account of the proceedings and of the papers presented at the meetings of the American Nurses' Association, as well as many of those read at the meetings of the two other organizations, will appear in the June, or convention, number of the American Journal of Nursing. Copies may be secured through the editor, Miss Palmer, at the Rochester office. Papers of particular interest to the readers of the Public Health Nursing Quarterly and The Modern Hospital will appear in later issues of these magazines.

"L. G.," writing in the Weekly Dispatch of war nursing in Paris, says of the Japanese contingent working in the Hotel Astoria in the Champs Elysees:—

"Every wounded soldier who has been cared for by a Japanese

nurse will tell you there can be none better. 'She has fingers of velvet,' one poor mangled lad assured me as his little Jap nurse moved away from his bedside. She was a tiny scrap of a woman, with hands that seemed too small for any practical use, yet she could dress a wound so deftly and lightly as not to cause even a twinge of pain.

"The implements, bandages, and operating tools came all the way from Japan in 100 packing cases, and the storeroom is a fascinating place with its packages covered with foreign labels, all arranged with exquisite neatness and care. And being Japanese the senders found room in the cases for beautifying touches, so for every bed there is a fan of sunflowers or massed cherry blossoms, and a small metal scroll with 'Good Luck' inscribed upon it."

There are a number of auxiliary nurses who are French, English and American helping at the Japanese hospital, and it is good to hear how favorably these highly-trained, dignified and devoted little Japanese ladies impress their patients.—*British Journal of Nursing.*

CORRESPONDENCE

Some extracts from a letter from a nurse at the front:—

St. Albans, Herts, April 25, 1916.

"Just now we got ready to receive the ambulance. We were sure we heard the motor at the entrance, so we hurried down, each with her little candle, as the lights have been turned out since early in the night, in fear of Zeppelins. We were mistaken in the noise as it was in front of the house just outside our gate. This is a depot station. There are hundreds of troops here training, so mostly all of the R.A.M.C. with their ambulances and the infantry were ordered out to-night and they say all the officers have been recalled so there must be something doing. It was quite exciting here. Being a holiday, so many of the soldiers had their friends and sweethearts to visit them. The streets were quite crowded. This is quite a fair sized place, very nice stores and churches. A most beautiful old Abbey is here. It is immense, was built in the 13th century. Every Sunday morning the soldiers attend service. I attended last Sunday and really it was a sight to see so many in khaki. There were about two thousand altogether. To hear them sing was glorious. I came here last Thursday and am on night duty, it is a hospital of 40 beds, have both officers and privates and among them two D.C.Ms., so we are quite distinguished. We have one officer from Toronto, Dr. Millman's son, from Huron Street. He was flying in his airship when it dropped and struck a tree, shaking Lieut. Millman up considerably. He was quite excited the day I arrived. He saw my trunk in the corridor, labelled Toronto, and he could scarcely wait to see who I was. We have a number of operative

hernia cases. One chap was hurt trying to jump over a fence. His captain ordered them all to jump this fence and he was hurt in the attempt. We have two with fractured skulls. In five months we have had ninety-two operations which is not too bad for so small a hospital. I have been in Isleworth Auxiliary Hospital where they had 350 beds. We heard some appalling stories of life at the front. It makes your heart ache to see and hear what these chaps have endured, and yet despite it all they are the happiest and brightest chaps. We feel we cannot do enough for them to compensate for what they have done for us. I wonder when this diabolical campaign will cease. It is terrible. We must bow to conditions and only hope and pray it will not last much longer. I am very happy in my work. I wouldn't leave the Tommies for worlds. This war is bringing out the best that is in the men. They are all perfect gentlemen. There is such a sympathetic feeling among them for each other and they assist each other as much as is possible. I have a very sick pneumonia patient and when I went in to him tonight the fellow in the next bed said, "Sister, he has done well to-day." It is almost pathetic how they feel for each other. We had such nasty dressings in Isleworth. I had one chap who had lost all the toes on one foot and part of two on the other, through frost bite, in Servia. They told me they saw chaps take their boots off and their toes came off too. One fellow had his tongue frozen until it dropped out in pieces. Another chap, 19 years old, had lost his right arm, another his eye and part of the bone of his shoulder blown off. Some shot in as many as five places and still these chaps never complain. The shell shock cases were pitiful, they were so long convalescing. I was in London for nearly a week before coming here; had such a good time; stopped at a home for nurses and met nurses from all over. Their experiences were most interesting. We hope to go on the continent some time soon. All the hospitals have V. A. Ds. It is wonderful the work these girls do. They come from homes where a staff of servants is kept and yet they do the cleaning, etc., in the wards and in the kitchens, laundries, and all over the hospital. I had an Indian Princess in my ward in Isleworth. She was a splendid little worker. We also had Lord White's two daughters. He was knighted you remember, at the relief of Ladysmith in the South African war. We had the King, Queen and Lady Minto visit us one afternoon. They came quite unexpectedly as they wished the visit to be informal. They visited all the wards and talked to the patients in turn. I had the honor to talk to the King and Queen and also Lady Minto. The King is so ill looking and walks quite lame. The Queen is very pretty, so regal, her pictures do not begin to do her justice, and Lady Minto is charming. She invited all the Canadian Sisters of our hospital to a special matinee in a London theatre for the benefit of the Maple Leaf Club, a home for Colonial soldiers while in London. We had a delightful time."

Honor Roll of Nurses from Canada

For King and Country at the Front

Nova Scotia

Benvie, Ada
Calder, Jennie
Churchill, Sara
Cummings, Isabel
Campbell, Jean
Davidson, Jessie
Donarau, Mrs.
Ellis, Margaret
Fraser, Florence
Follette, Minnie
Fitzgerald, Lillian
Hubley, Laura
Howard, Alice
Johnson, Alice
Lordly, Edwina
Mills, A. Muriel
Masher, Eva
McLean, Katherine
McLeod, Margaret
McKay, Alice
McInnes, Florence
MacDonald, Louise
MacDonald, Jessie
MacDonald, Nellie
MacDonald, Mary
MacDonald, Margaret
Mitchell, Jean
MacKenzie, Margaret
Rice, Francis
Thompson, I.
Williams, Maisie
Young, Rose
Venner, Grace

Ontario

Anderson, Ethel
Aitken, Elizabeth
Alway, Edith E.
Askin, M.
Abenethy, Mary M.
Armstrong, Alberta B.
Ashley, Marguerite
Armstrong, Marion
Armstrong, Alice M.
Adams, L.
Austin, P.
Allwood, M. J.
Alport, J.
Adams, K.
Augustine, E.
Austin, P. B.
Adams, M. L.
Brankin, Margaret
Blais, Yvonne
Brewer, E.
Bull, Ida
Bishop, Margaret
Bowie, Jennie E.
Brock, Louise
Baudry, Y.
Bowker, Margaret
Blewett, Beatrice
Baillie, Annie
Bonter, Mabel A.
Brydon, Harriet
Billings, Grace B.
Bowlby, Stella
Black, Helen
Blackwell, —
Best, Minnie
Bastedo, M.
Baird, A.
Brewer, E. A.
Bryce, Jean
Burns, Mrs.
Chapman, Mabel
Connor, Queenie
Carr, Ida M.
Charleson, E. M.
Clark, M.
Cunningham, Bertha
Collins, Cora
Corrigan, Viola
Cummings, Mary
Cradock, Agnes
Cornett, Ruby M.
Christie, Nellie J.
Carmichael, Rachel
Carr, Sophia
Chapman, Willa
Colbourne, Muriel G.
Connerty, Lillian E.
Currie, Isabel M.
Cotton, D. P. M.

Carscallen, Aneta
Chandler, Florence M.
Charters, F.
Clarke, E.
Craddock, Agnes
Campbell, N.
Courtice, J. P.
Campbell, S. A.
Carmichael, M.
Christie, A. M.
Conlin, —
Cummings, —
Crysler, Ferne
Craig, Ruth
Cameron, Sarah
Carveth, Bertha
Dawson, Hazel
Davis, Agnes Balfour
Dixon, Lillian
Doucet, Marie Y.
Donavan, M.
Dancey, Alma
Douglas, Mabel K.
Darling, Grace C.
Douglas, Irene M.
Drummond, Helen M.
Doucette, Y.
Dougherty, Mary
Donnley, Caroline
Devitt, Rose M.
Darling, M.
Drummond, H.
Davis, —
Dickson, A.
Dow, M. E.
Dean, D.
Darling, M.
Doyg, A.
Dunn, E.
Davis, L. A.
Driver, Mrs. S. M.
Ellwood, Frances E.
Evans, Mary
Elliott, —
Elliott, E. F.
Finlayson, Eliza
Francis, Maud
Fraser, Margaret
Fielder, Myrtle
Fowlds, Helen L.
Fay, Margaret
Fortune, Martha A.
Fellows, Stella
Franks, H.
Fraser, Edna
Fletcher, M. E.
Fields, A.
Ferguson, —
Gooden, Myra
Gallaher, Minnie
Goddard, W. V.
Gillean, H. F.
Gerrard, Nellie
Gallagher, M. E.
Geen, Celestina
Glass, Josephine F.
Galbraith, Mary F.
Gray, Grace A.
Gleeson, Helen
Goneau, Marguerite
Galbraith, Margaret
Groves, Katherine
Grisson, —
Grindley, A.
Galbraith, L.
Gray, G. A.
Gamble, L. A.
Galbraith, M. F.
Gamble, A. V.
Grindlay, A.
Gardner, Anna
Hammerton, Leilla
Hanna, Maud B.
Halpenny, Gertrude
Hastey, Kathleen M.
Hughes, Bertha
Hamilton, Mary O. M.
Hopkins, Louise
Holland, Edith O.
Hunter, Florence
Hiscock, Grace B.
Hambly, Mary H.
Harrington, Lenora
Hambly, Vivian V.
Hamilton, Ruby E.
Hansen, Helen E.
Hinch, Helena S.
Howey, Nettie E.
Hinchey, A. R.
Hodgson, I.
Huston, Agnes
Huston, A.
Hally, Rose
Hitchcox, Miriam
Hopkins, Florence
Hanley, Agnes G.

Iddington, Flora
Ivey, P.
Irwin, Florence
Jones, Eliza A.
Johnston, J.
Jenkins, Stella M.
Johnston, Susie
Johnston, Jean
Johnston, M.
Joice, Mabel
Johnston, Frances
Johnston, E. M.
Jaffray, Madeline
Jackson, Sadie B.
Kintz, Ida
Kennedy, Margaret G.
Kinnear, Helena M.
Krupp, L.
Kidd, Lula
Kilborn, Gladys H.
Kenny, Bella
Kingston, Mary A.
Keefer, Z. M.
Lee, Margaret
Latimer, Clara
Lawrence, Kate
Lane, Maysell A.
Leslie, Gladys E.
Lloyd, Edith F.
Lemlan, Ethel
Leanny, Florence
Leanny, Margaret
Lucas, —
Langman, Marguerite
Lucas, M.
McIntosh, Bertha M.
Mackintosh, Margaret
Mellett, Henrietta
Martin, Jessie
Merriman, Bertha
McLaughlin, F.
Morton, M. Y. E.
Munnock, Agnes B.
McNicholl, I. U.
McLeod, F. M.
Maguire, Bella O.
Maguire, Belle
McLeod, F. H.
McNaughton, Mary A.
McMillan, Myrtle
McBride, Minnie P.
MacDonald, Jean A.
McEwen, Florence I.
McGregor, Jean
MacNamee, Ethel
Mastin, Hattie M.
Milroy, Kate C.
Misner, Minnie E.
Moore, Emma C.
Motton, Olive P.
Moran, Mary I.
Mowry, Bertha M.
McIntyre, Isabel
Mills, Margaret M.
McAllister, Charlotte
Mercer, E. C.
McCallum, F. E.
Mills, Elizabeth
McKenna, May
Murray, Kate
McNicoll, Anna
McGrath, Mary
McIlroy, Isobel
Mitchell, B.
Monk, M.
McLean, C.
McCrae, Mrs.
McEachren, M.
Moore, E. L.
McCort, M.
Martin, J. M.
Morris, E.
McLeish, E.
McElroy, —
Muldrew, —
MacCallum, H.
McMurrick, Helen
McIntyre, Margaret
Morris, Florence
McMann, Francis
Nichol, Florence
Neelin, E. F.
Oatman, Matilda
O'Reilly, Edith
O'Neill, Mary
Oram, A. M.
Owen, M. E.
Oatman, C. M.
Pringle, Ina F.
Princeps, P.
Powell, Helen
Pugh, Lillian, E. D.
Potter, Florence
Potter, Helen
Pense, E. F.
Pugh, Murney

Princet, Pearl
Pell, Constance
Parquette, —
Panton, K.
Pike, F.
Peterkin, R.
Read, Helena
Ray, Victoria
Rayside, E. C.
Robertson, Irene
Roberts, Pansy E.
Reid, Gertrude F.
Rowe, Bertha E.
Robinson, Laura M.
Robb, Bertha B.
Robertson, Marion
Roblin, Ethel M.
Russell, M.
Redmond, Elizabeth
Refroy, —
Reardon, Agnes
Reade, D.
Ruddick, M.
Riley, Annie
Richardson, M. I.
Ross, A. K.
Richmond, E. L.
Robertson, I.
Riddle, Margaret
Robinson, Laura
Ramsey, Jane L.
Ross, Marion
Regan, L.
Shearer, Helen D.
Smith, Wilhelmina
Strange, Vera
Smith, Margaret
Stevens, Elsie
Seeler, Anna M.
Spanner, G.
Sager, Ellen
Scott, Edith
Stuart, Hilda M.
Seeley, Eleanor M.
Sampson, —
Stinson, Annie E.
Stewart, Ellen M.
Soutar, Marion
Shepard, L. R.
Seely, Eleanor
Sewell, Violet
Stagg, Winnifred J.
Stewart, Martha J.
Sparks, Etta
Stevens, Marion
Smith, Frances M.
Stacey, Harriet O.
Scott, J. T.
Stirling, A. M.
Stewart, C. I.
Stevenson, L.
Stewart, M. C.
Spanner, G. L.
Sibbald, H.
Stagg, —
Smith, Bertha
Turner, Lillie
Turcotte, Adelaide
Tuckett, Patricia
Turner, N.
Wilson, Isabel
Walker, Ada
Wallace, S.
West, F.
Willis, I.
Watson, R.
Woolsey, Maude
Webber, Bertha M.
Watkins, Sophia A.
Whitlam, Edith C.
Waters, Grace B.
Willis, Mary M.
Wylie, Marion I.
Willoughby, B. J.
Weatherup, —
Whelan, Mona
Wylis, Marion
White, C. L.
Wilkinson, —
Wood, M.
Wilson, Jessie
Young, Elsie L.

Manitoba

Aikman, Elizabeth
Andrew, Alba
Attrill, Alfreeda
Burns, Maimie
Bell, Lola
Billyard, Gertrude
Brown, Mrs. (Dr.)
Corelli, Hilda
Conner, Grace
Cummings, Margaret
Deason, Edith M.
Didion, Bertha

Eamer, Harriet A.
Fraser, C. de Milly
Forrest, Annie
Galt, C.
Garland, Olive
Howe, M.
Hudson, Edith
Hood, Clara
Jamieson, Florence
Johnston, S. P.
Johnston, Annie E.
Lynch, Lillian
Lidoux, Blanche
McGill, Margaret
McInnes, Elizabeth
Mowat, Wilhelmina
McLean, Florence
McNeil, Florence
Martin, Perley
Morton, Emma
Parker, E.
Paquette, Sarah
Ross, Ada J.
Sutherland, Jessie*
Sheridan, Marie
Sullivan, Mary
Smith, Jessie
Scoble, —
Whittick, F.
Younghusband, Lottie

Saskatchewan

Andrews, Maude
Best, E. M.
Bolster, —
Brown, A.
Brock, —
Barry, —
Bond, Mary J.
Bloy, Florence M.
Clorence, —
Cowan, Jean M.
Cummings, H. G.
Dale, C.
Dunham, Agnes C.
Duffus, Ruby M.
Fraser, Margaret
Ferguson, Sadie
Franks, Edith
Fisher, Christina
Gallaher, Minnie K.
Gent, Jessie M.
Hood, Edith A.
Hindley, Alice
Huddon, Cordelia
Kennedy, Margaret
Kropf, Sarnia
McCurdy, Nellie C.
Mellett, Henrietta
Martineau, Anna
McRae, Jessie A.
Nicholson, Ona G.
Ryan, M. E.
Redmond, Ellen S.
Reilly, Margaret E.
Smith, Elizabeth
Sisman, Kathleen
Thompson, Violeta
Twiddy, Anna M.
Urquhart, Jean
Upton, Helen
Whitlam, Ida E. A.

OUR HONOR ROLL

We had planned a complete list this month of the Nurses from Canada who are on active service at the front. We have a goodly list, but it is not complete by a long way. Will all those who are arranging lists for us please forward them as soon as possible?

And we will be grateful to any who can help to make our lists complete, if they will kindly do so at the earliest opportunity. A permanent list of the nurses who are helping win this fight for truth and freedom, would seem desirable. Please help us to see that none are overlooked.

Editorial

A STANDARD

As we study the nursing profession in the different countries of the world, we note that everywhere the members are striving to establish a standard, sometimes high and sometimes not so high, but always progressive, by which those seeking to enter the profession may be measured. This is what every profession has done and is doing, for the standard that was pronounced good fifty years or even twenty-five years ago is not the most desirable one to-day. There must be progress The standard must advance so as to make more efficient service possible. And, we take it, the nursing profession should not be a laggard in the general advance. Efficiency must stamp the members of this profession as well as those of all other professions.

And as a rule we find that nurses everywhere are standing for better and broader professional education so that the service they render the public may be all that it should be. This is right, for a profession that does not keep pace with the times so as to be ready to meet the demands made upon it is not worthy to be called a profession. But it always takes the exception to prove the rule, it seems. Our amazement was unbounded when recently we heard the president of an important association advocate a "loop-hole" to let in all and sundry who wished to be called nurses. To the credit of the association be it said, they did not back up their officer's views. Years had been spent in striving for a recognized standard and were they now to say they had been following a myth and must right about face and let in every one, no matter what the training? Not so! And, too, just when the association had made its influence felt to the extent that one private hospital, in order to force provincial recognition for its graduates, had an Act introduced at the last session of the Provincial Legislature, to declare this institution a public hospital. And this Act was passed!

These graduates may perforce be received, but, the Act notwithstanding, is their education any more complete than before? And a position gained in such a way is not always the most desirable in the world.

A standard there must be, and that standard must be maintained if the profession is to be held in any way responsible for the conduct of its members and the kind of service they render the public. So let not discouragement find a place in your calculations in spite of the very great difficulties that are to be overcome and the obstacles that arise in unexpected quarters. What is worth having is worth struggling for. So struggle on till a desirable standard is established and then do not slacken your efforts, but see that it is maintained, and from time to time improved.

THE GRADUATE NURSES' ASSOCIATION OF ONTARIO.

(Incorporated 1908.)

President, Miss Kate Madden, Supt. of Nurses, City Hospital, Hamilton; First Vice-President, Mrs. W. S. Tilley, Brantford; Second Vice-President, Miss Kate Mathieson, Supt. Riverdale Hospital, Toronto; Recording Secretary, Miss E. McP. Dickson, Supt. of Nurses, Toronto Free Hospital for Consumptives, Weston; Corresponding Secretary, Miss Isabel Laidlaw, 137 Catherine St. N., Hamilton; Treasurer, Miss E. J. Jamieson, 23 Woodlawn Ave E., Toronto.

Directors: Jessie Cooper, Ina F. Pringle, J. G. McNeill, J. O'Connor, E. H. Dyke, L. M. Teeter, M. J. Allan, M. L. Anderson, S. B. Jackson, Isabel R. Sloane, and G. Burke, Toronto; Mrs. Reynolds, Miss Simons, Hamilton; Bertha Mowry, Peterboro; C. Milton, Kingston.

"Ye served your brother; ye have served your Lord," was the closing sentence of Dr. N. A. Powell's fine address to the Graduate Nurses' Association of Ontario at their 13th annual meeting, held in the Hospital for Sick Children, recently.

Dr. Powell's subject, "Medical Jurisprudence as It Relates to Nurses," does not strike one as poetical or inspiring, but in the skilful hands of the speaker, the dry bones of the law and the broken bones of patients were clothed with beauty and sentiment. "Laws are needed to regulate the practice of medicine, or we should not have outgrown the period when, after studying medicine for fifteen months, a man could go out armed with a diploma and all his dense ignorance and practice on a suffering public. Before that time an ambitious man went across to Sackett's Harbor and bought a diploma for a load of whitefish, a truly scaly way of getting into the profession. The time is ripe for legislation to protect the fully qualified graduate nurses. They are held responsible for certain things in contracts, and in cases of malpractice. Laws reflect the character and intelligence of the people. About one hundred years ago Toronto passed one of its first death sentences, and hanged a boy for stealing the equivalent of seventy-five cents. We used to link together inseparably the sin and the sinner, but now we are trying to punish for the purpose of reform, and with all spirit of vindictiveness removed. Nurses must strive to beat their own record and to be satisfied without affluence, but with the epitaph, 'In noble deed she wore her life away.'"

Colonel Rudolf, formerly one of the physicians of the Hospital for Sick Children, was given a most enthusiastic reception. He went overseas with the first Canadian contingent, and has had a varied experience with the different stages of preparation for caring for the soldiers. He gave in detail the system of getting the sick and

wounded from the trenches to the kind of hospital their case demanded, then the kinds of treatment and diet used. As in other wars, there are more casualties from disease than from wounds, but only those wounded are eligible for the roll of honor. The stretcher-bearers are the bravest men in the army. The nurse who was killed on the battlefield had gone beyond her rights, as no nurse is allowed within a certain safe distance.

The hospital trains and the hospital ships are well fitted up and are Paradise to the tired, muddy and nerve-shattered men coming from the trenches. Dr. Rudolf had been so fortunte as to spend some time on a hospital ship, for God sent him the mumps. He described the scene when a hospital train arrives at a general hospital and unloads its 150 stretchers of severely wounded and its 300 sitters, whose wounds are less serious. The ambulances are loaded. Those who can, walk, and those able to help carry others pick-a-back. It usually arrives about 2 a.m., and doctors and nurses work many hours without slackening, until all are made as comfortable as circumstances permit. Though so many nurses have gone from Canada, they are few compared with the nurses of the Royal Army Medical Corps and the many volunteer nurses who have had some training. The Canadian nurses, with their lieutenant's rank, mixed things up a bit at first, as military discipline as usually applied to officers of that rank was a misfit, but they soon settled into the usual routine of military hospital work. The English nurses do not have as much freedom of action as do the Canadians, and would never be allowed the liberty of dancing or of having afternoon tea with the officers at the Sisters' Mess. It has not spoiled the nurses in the least, and the medical men are full of admiration for the fine, steady work of the women, which Dr. Rudolf generously ranks as of greater importance in life-saving than that of the doctors.

The business session was held in the forenoon in the Medical Lecture Room of the Toronto General Hospital.

One of the important moves of the Association was the resolution disapproving of the proposed action of the National Council of Women in sending trained midwives to the sparsely-settled districts of Canada. They ask instead that the Council aid in extending the scope of the Victorian Order of Nurses, which aims to reach just such cases. The reports given show that excellent work is being done through the Province, and a large membership being secured. The exhibit of appliances for the correction of orthopedic and other deformities was of great interest, as was the practical demonstration on how to restrain and protect children after certain operations and when wearing corrective appliances. The Association will not likely meet in Toronto next year, as other cities are anxious to have it. At the close of the afternoon session tea was served at the Nurses' Residence.

THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES, MONTREAL

President—Miss Phillips, 750 St. Urbain St.
First Vice-President—Miss Colley, 23 Hutchison St.
Second Vice-President—Miss Dunlop, 209 Stanley St.
Secretary-Treasurer—Miss Des Brisay, 638A Dorchester St. West.
Registrar—Mrs. Burch, 175 Mansfield St.
Reading Room—638A Dorchester Street West.

MISJUDGED

By Agnes Jamieson, Montreal.

Oh! that by magic, we could learn to read
The minds, of those who judge us not aright,
That we might show ourselves in different light
To them who have meen led by word, or deed,
Or thoughts absurd to such dishonest creed.
We know that they are free from every blight
Of guilt, formed in the mind from oversight,
And we as innocent as flowers of mead.

But such is life to all of us who trace
These paths of difficulties here below,
So let us always be true friends, in place,
That we no more may thus be misjudged so,
But speak our minds without deceit or sin.
Then Friendship reigns supreme in hearts within.

Do that which is assigned you, and you cannot hope too much or dare too much.—*Emerson.*

On May 24th, the new Lady Minton Hospital at Cochrane, Ont., was formally opened. The building is a very attractive one, with accommodation for twenty patients. The Hospital will serve a large district, and has a very bright and busy future before it. Miss Lottie McLeod is the Superintendent, and Miss Yuill, her assistant. .

On June first, at a well-attended meeting called by the South Shore Board of Trade, definite steps were taken to form a local association of the Victorian Order of Nurses, to supply district nursing care for Montreal South, St. Lambert, Longueil and Greenfield Park.

Miss Wallace, formerly head nurse of the Victorian branch, is now District Superintendent in Toronto. Miss McNair has succeeded Miss Wallace in Victoria, Miss Norcross is her assistant.

Miss Featherstone is nurse-in-charge of the Westmount district, and Miss Parker of the Lachine district. Mrs. Holden is senior nurse in Grand Mere, and Miss Betty Crawford is her assistant. Miss Truesdale is in charge of the Sydney district: Miss Gillis is her assistant, and Miss Dubbin has charge of the Whitney Pier branch.

In Sherbrooke, Miss A. Symonds is senior nurse, with Miss Hache assisting. Miss Collings has been appointed nurse-in-charge of the Canso district.

The report of the Welfare work of the Metropolitan Life Insurance Company for its industrial policy-holders for 1915, has just been received and is replete with interesting facts. Every nurse should secure a copy from the head office of the company, in New York. Dr. Frankel in it deals first with the visiting nurse service and states that 202,659 patients have been treated by the nurses in 1915 in 2,001 cities and towns in the United States and Canada; 1,078,863 visits have been made and $553,900.10 expended for nurses' services. It is noted that the Maternity service has continued to develop and the hope is held out that in 1916, the "Company may be able to offer pre-natal service to

all of its policy-holders." The value of advising the prospective mother regarding the preparation for her maternity and the care of herself during the pre-maternity period cannot be over-estimated.

Two very good suggestions are made relative to extending the nursing service to patients suffering from infectious diseases and to patients in rural districts.

Some other phases of the work of this division are dealt with under the headings: "Unemployment Survey," "Clean-up Campaigns," "Welfare Literature" (this literature is excellent, and is well worth a perusal by every nurse), "Exhibits" (the Company's exhibit in San Francisco was awarded the Medal of Honor, and its exhibit in San Diego, the Grand Prize) "Picnics," "Health and Happiness League," "Emergency Relief to Policyholders," "Contributions to Societies." In connection with the "Health and Happiness League," Dr. Frankel writes: "I believe it to be highly desirable to organize the children of the Health and Happiness League in the various communities in which they live into definite groups and to give them a definite health programme, which they might carry out during the year." That is a very valuable suggestion which should be developed.

The hope that the Company had that their Welfare Division might be of considerable assistance to Social Workers, Social Agencies, and Health Departments, is very assuredly being realized.

The Victorian Order of Nurses for Canada offers a post-graduate course in district nursing and social service work. The course takes four months, and may be taken at one of the Training Homes of the Order: Toronto, Ottawa, Montreal, Vancouver. For full information apply to the Chief Superintendent. 578 Somerset Street, Ottawa, or to one of the District Superintendents, at 281 Sherbourne Street, Toronto, One.; 46 Bishop Street, Montreal, Que.; or 1300 Venables Street, Vancouver, B.C.

HOSPITALS AND NURSES

British Columbia

Miss Margaret Rose and Miss Ethel Boultbee, graduates of Vancouver General Hospital, who for the past year have been serving in one of the Canadian Base Hospitals in France, have been transferred to the Daughters of the Empire Red Cross Hospital, recently opened in London.

The New Westminster Graduate Nurses' Association entertained the 1916 Graduating Class of the Royal Columbian Hospital, Friday evening, April 28th, in the Nurses' Home of the Hospital. The tables were very prettily decorated and covers were laid for twenty-five. Each member of the class was the recipient of a bouquet of carnations tied with the school colors. Amongst those present were Mrs. R. Bryce Brown, President of the B. C. Graduate Nurses' Association and Canadian National Association of Trained Nurses; Miss Helen Randal, President of the Canadian Society of Superintendents of Training Schools for Nurses; Miss Alice Stark, President of the New Westminster Graduate Nurses' Association, and Miss Margaret Colvin, Superintendent of the Royal Columbian Hospital, with her staff, and others.

Mrs. Brown and Miss Randal appropriately addressed the class, and a very enjoyable evening was spent.

The Graduating Class consisted of Misses Muriel Purdy, Ada Sipprell, Olive Reichenbach, Eleanor Bishop, Isobel Nichol, Annie Murray, Cicely Collishaw, Laura Johnston and Rheta Johnston.

The Exercises of the 1916 Class of the Royal Columbian Hospital were held in the new wing of the Hospital on Wednesday, May 3rd, and were carried out most satisfactorily. Interest in the work of the nurses is rapidly increasing amongst the citizens, and there was a larger and more representative attendance than on any previous occasion. Mayor A. W. Gray, as Chairman of the Board of Directors, occupied the chair and made a brief but concise report upon the work of the Hospital. The chief speaker of the day was Dr. Little, and the address to the Graduating Class was made by Dr. E. H. McEwen. The diplomas and medals were presented by Mrs. A. J. Hill, until recently a member of the Board of Directors, where she served for over fifteen years and now an honorary member and still very active in her work for the institution. At the close of the proceedings, refreshments were served.

Owing to the numerous tasks which have been undertaken by members of the Association and the assistance which they have been rendering other organizations for the benefit and comforts of our soldiers and sailors during the war, there is very little to record of the work done by the Association during the year.

We made and sterilized, two thousand dressings, and supplied one thousand yards of gauze, all of which was sent to the Red Cross Society.

In this connection, it is worthy of note that the Nurses in Training at the Royal Columbian Hospital also supplied one thousand yards of gauze which they made up into dressings.

The Registration Bill which the B. C. Graduate Nurses' Association has been working on for some time, is again before the Legislature, and we hope that at the present session the Government will see fit to place this Act on the statute books.

Thirty nurses from the Vancouver General Hospital and two from an outside institution received their diplomas and pins at the King Edward High School auditorium, on Wednesday, June 7, 1916.

It was an auspicious gathering, some of the most prominent men and women of the city being present at the exercises, and the graduated nurses were tendered wise counsel and good advice in connection with their chosen mission in life. Patriotic references were mingled all through the ceremonies in speakers' subjects, and those of the nurses who have concluded to go to the front and do their bit on the field of battle, were congratulated for their bravery and devotion.

The nurses' class furnished a pretty picture as it made its way to the front of the auditorium, each carrying a bouquet of carnations, which were thoughtfully provided by Mrs. Buttle on behalf of the head nurses. Mrs. Murray, Mrs. J. H. Senkler, Miss Andrews and Miss Snyder, acting lady superintendent of the hospital, were each the recipient of a beautiful bunch of roses from the directors of the hospital.

The coveted gold medal for general proficiency fell to Miss Christina M. Musselman, of Edmonton. This medal is one presented by Dr. R. E. McKechnie, and was presented on his behalf by Dr. McEachern, Dr. McKechnie being absent in the East. The bestowal of the Florence Nightingale pledge to elevate the standard of the profession and hold in confidence the affairs of family and physician, was also given.

Addresses were given by Mr. J. J. Banfield, Chairman of the Hospital Board, Mr. Justice Macdonald, Mr. James McQueen and Mayor McBeath.

The musical part of the programme consisted of two solos by Mrs. D. B. Morkill, nee Maguire, who was accompanied by Mrs. Arthur Ray.

A reception followed at the new Nurses' Home, where an orchestra was in attendance and played patriotic airs.

The medals were presented by Mrs. W. Murray, President of the Woman's Auxiliary, and the diplomas by Mrs. J. H. Senkler.

Another interesting presentation was in the form of diplomas to

affiliated nurses, by Miss Andrews, of Chemainus Hospital, this being the result of a new rule passed by the board to the effect that nurses from other hospitals might be received in affiliation upon serving one year in the Vancouver General Hospital. Two nurses, the Misses Edith Forrest and Christina Mitchell, of Chemainus Hospital, were the recipients of diplomas.

At the conclusion of the graduation exercises a roll of honor was unveiled by Lieut.-Col. Milne, officer commanding the 158th Battalion, D.C.O.R., of those nurses who have gone from Vancouver for service overseas. The names were as follows: Misses A. Baker, E. Craig, M. Fox, M. John, E. Charles (drowned in the Lusitania), G. M. McCullough, J. McLennan, A. Taylor, B. Winters, E. Boultbee, E. Edwards, M. Heeley, J. Johnstone, A. Morris, M. McLane, M. Quigley, E. Wade, A. Bruce, E. Eveleigh, E. Hibbs, I. Lord, E. Morrison, G. McLean, M. Rose and L. Whitworth.

Col. Milne said he felt sure that those nurses on the honor roll were just like those of the hospital in Vancouver. Several men from his regiment had been obliged to enter the hospital and all had paid tribute to the splendid work so cheerfully done by the nurses; that it was an inspiration to go through the hospital. Several in his battalion who were going back to do a little more, had spoken of the cheery way in which the non-commissioned officers in the trenches give the orders, and lightly chaff when shells are flying around, and that a number of D. S. O. medals had been won for that, as much as for special bravery in the field, and he felt that the same bright spirit was among the nurses, and if more were needed he was sure the material was there and would be supplied. The horror of this terrible conflict was that it was necessary to send the best of manhood and the best of womanhood, but it would continue to be done until victory were won.

The nurses who received diplomas are: The Misses Mamie F. Brown, Margaret H. Murray, Amelia G. Child, Muriel Matheson, Josephine B. Peters, Lewella J. Stewart, Myrtle Sexsmith, Janet R. Howe, Edith H. Wright, Rhoda B. McGregor, Annie H. Esselmont, Elizabeth Fuller, Lillie Fogg, Rachel Morison, Edith A. Blair, and Maude Bowser, all of Vancouver; the Misses Grace I. Bruce of Stephenfield, Man.; Rosa Rothwell, Oxford, England; Minnie F. McLennan, Green Ridge, Man.; Mabel R. Baskin, Montreal, Que.; Isabel R. Boultbee, South Tawnton, Okehampton, England, Carrie H. Robson, New Westminster; Emile M. Brown, South Bellingham, Wash.; Helen M. Anderson, Moose Jaw, Sask.; Mabel H. Mogk, Sperling, Man.; Nettie Stirrup, London, Eng.; Lorraine Shantz, Edmonton, Alta.; Julia Miller Wilson, London, Eng.; and Constance M. Hodgson, Hatzic, B.C. The medals were presented by Mrs. W. Murray, president of the Woman's Auxiliary.

Saskatchewan

One of the most pleasing ceremonies that was ever witnessed at the Armory, Moose Jaw, Sask., took place on Monday afternoon, May 29th, when the men of the 128th Battalion showed their appreciation of the services rendered by the nursing staff of the General Hospital, by presenting each nurse with a monogrammed and suitably engraved silver card case or mesh purse.

The nurses, who arrived in autos, were entertained at tea in the Sergeant's Mess. After tea they were escorted by Lieut.-Col. Pawlett to the main floor of the Armory, where the full Battalion had been drawn up. In a humorous, but feeling speech, Lieut.-Col. Pawlett, on behalf of the men of the 128th, expressed their deep appreciation of the nurses' kindness. Miss Wilson, the Superintendent, in a brief speech, heartily thanked the men of the 128th Battalion, and stated that she believed it was the first time in the history of the hospital that such a kind and pleasing action had taken place. Each nurse would treasure for all time the beautiful presents given them by the men.

At a signal from Lieut.-Col. Pawlett, calling for three cheers for the nurses, the roof simply shook with the response the men gave, and in a few minutes the Battalion was dismissed from parade and the men were soon out vieing with each other in showing the nurses the inside of military life.

Upon departure, the nurses (exceedingly delighted with their warm reception) vowed eternal friendship to all the men of the 128th Battalion.

Manitoba

Miss Park, who has been in charge of the operating room of Brandon General Hospital, has again resumed private nursing. Miss Jenkins is now filling this position very acceptably.

Nursing Sister Johnston, late of B. G. H., is stationed at Ramsgate, in the X-Ray department of Granville Canadian Hospital. Miss Mowat has been transferred to France in No. 2 Canadian Hospital.

The Graduate Nurses of the city are employed when off duty, preparing Red Cross dressings. Miss Birtle, Superintendent of the Hospital, having given the use of the new demonstration room for this purpose.

Ontario

Miss Ella Jamieson is to represent the Canadian Public School Nurses' Association at the annual meeting of the Canadian National Association of Trained Nurses, at Winnipeg.

The C. P. S. N. A. held their June meeting at Victoria Park Forest School, Toronto.

Miss Jean Carr, graduate of the Collingwood G. & M. Hospital,

class '01, died suddenly at her home in St. Mary's, on May 15, 1916 At the time of her death Miss Carr was Secretary-Treasurer of the Collingwood Alumnae Association, of which she was a charter member. She has always been a faithful worker. In private practice she was loved by all her patients.

Miss Bake, Superintendent of Hospital, sent $4.00 for surgical supplies for the Red Cross.

The annual meeting of the Collingwood Alumnae was held in the Hospital on May 25, 1916. The officers elected were: President, Mrs. Lee; 1st Vice-President, Miss Greesbach; 2nd Vice-President, Miss Rainey; Secretary-Treasurer, Miss E. M. Dawson; Assistant Secretary-Treasurer, Miss Shaw. The nurses meet every Saturday afternoon to make surgical supplies for the Red Cross. The Alumnae Association meets the fourth Thursday of the month.

Miss E. Regan, late of St. Joseph's Hospital, Port Arthur, Ont., has been in England since May, 1915. Miss Regan writes that she is very busy at Cliveden since her return from a ten days' leave which she spent visiting Killarney, Dublin and Cork, Ireland, and a few days in London.

Miss E. Cume, graduate of the Owen Sound G. & M. Hospital, class '05, left in April for England to join the Imperial Army of Nurses.

Miss Pickett is ill at her home with typhoid fever.

Miss E. A. Wood, Superintendent of the Owen Sound G. & M. Hospital, has gone to New York to take a post-graduate course in executive work, at the Harlem Hospital. During her absence Miss McArthur, the assistant, will be in charge, and Miss L. J. Gaden, graduate of the G. & M. Hospital, Class '16, will act as assistant.

Miss Mary Graham, Class '12, is also taking up post-graduate work in the Fordham Hospital, New York City.

Miss Forhan and Miss Wood were representatives from the Alumnae Association of the Owen Sound G. & M. Hospital at the annual meeting of the Graduate Nurses Association of Ontario.

Our Alumnae Association continues to keep up an active interest in Red Cross work. In spite of the fact that the nurses have been very busy all winter, a large number of socks have been knit, and dressings made.

The Graduating Exercises of the G. & M. Hospital Training School for Nurses, Collingwood, were held on Tuesday evening, May 22, 1916, in Parish Hall. Three nurses, Misses Pearl Ford, Nettie Vipond and Alice Gilpin, received their diplomas. A large and interested audience was present. Mr. H. Y. Telfer occupied the chair, and the address to the nurses was given by Dr. G. M. Aylsworth, President of the Medical Association. Dr. C. K. Clarke, superintendent of Toronto

General Hospital, was the guest of the evening. Dr. Clarke gave an interesting address. Diplomas were presented by Mrs. Meacham, school pins by Mrs. Knight, and class pins by Miss McCullough. Bouquets of red carnations were presented to the graduates by Misses Ruth Irwin, Isobel McKay and Marion Trott, and Master Noel Arthur. A pleasing remembrance from Miss Morton, who is at the front, in the form of bouquets of sweet peas, was also bestowed upon the nurses.

An address by Rev. E. E. Shields, and solos by Miss Paton, Miss Dorothy Mair and Mrs. J. M. Mitchell, completed a very interesting programme. The exercises were concluded with the National Anthem.

The McKellar General Hospital Training School for Nurses, Fort William, Ont., held its Annual Graduating Exercises on Wednesday, May 10, 1916. The seven nurses who graduated were: Maude Omie Baker, Mabel Stauch, Jessie Gorrie Grant, Leo Pearl Lounsbury, Catharine Margaret McPhee, Laura Margaret Morton, Eva Gertrude Hubman.

The medals and diplomas were presented by Major Hamilton who occupied the chair, and excellent addresses were given by George A. Graham and Dr. C. C. McCullough.

The Superintendent, Miss Isabel Johnstone, in the 13th report of the training school, stated that this class would bring the total number of graduates of this school to 47. The nursing staff, at present, consists of six graduates and 24 under-graduates, a total of 30 nurses to an average of from 80 to 100 patients per day.

Miss Hunn, graduate of McKellar Hospital, has gone to take a position in one of the military hospitals, England. This is seven graduates of McKellar Hospital who have gone to the front.

Miss K. Fisher, who has been doing private nursing, has been appointed city nurse for the summer.

Miss Steward who has been doing private nursing in our city for some years, left for her home in Saskatchewan.

We are glad to report that Miss Forbes, night Superintendent of McKellar Hospital, who has been ill since January, is able to return to her duties.

The tenth annual meeting of the Alumnae Association of Victoria Hospital, London, was held Wednesday evening, June 7, 1916, at the hospital. There was a full attendance. The report for the past year was read by the Secretary, Miss Whiting. It showed a successful and satisfactory year. In addition to the lectures delivered by London doctors, addresses were given on Red Cross work by Mrs. Betts and others. The Association donated out of its funds the sum of $200 to the Red Cross Society, and $25 to the Children's Shelter.

The officers elected for the ensuing year are: President, Miss MacVicar, Hospital for Insane, London; Vice-President, Mrs. Patterson;

Secretary-Treasurer, Miss Forsythe, Victoria Hospital; Programme Committee, Mrs. Josephs, Misses MacKenzie and Nash; Representative to The Canadian Nurse, Miss B. Gilchrist, Victoria Hospital.

Miss Stanley, Superintendent of Nurses, Victoria Hospital, introduced the twenty-four young nurses of the 1916 Class of the Hospital. Miss MacVicar addressed the young graduates and gave them a warm welcome into the membership of the Association.

Regrets at the departure, and best wishes for future success, were expressed to Miss MacDougal, our retiring President (for some years Assistant Superintendent of the Hospital), who is leaving with the Western University Hospital Unit for overseas.

Miss Stanley welcomed the Association to the Nurses' parlor, where a social time was spent.

QUEBEC

The annual meeting of the Montreal General Hospital Alumnae Association was held in the Nurses' Home on April 14, 1916.

Miss Colley, the President was in the chair. The minutes of the last annual meeting were read and confirmed.

Miss Dunlop and Miss Welsh acted as scrutineers and called for election of officers for coming year, which are as follows:—

President—Miss Z. Young.

1st Vice-President—Miss Colly.

2nd Vice-President—Miss Cowan.

Recording Secretary—Miss Strumm.

Corresponding Secretary—Miss S. E. Brown.

Treasurer—Miss Belknap.

Executive Committee—Misses Dunlop, Welsh, F. Read, M. Brock and McNutt.

Representative to The Canadian Nurse—Miss A. Jamieson.

Representatives to Local Council of Women—Misses Stewart and Howard.

Treasurer for Sick Nurses' Benefit Fund—Miss Dunlop.

Miss Ruth Logie, of McGill Unit, at Boulogne, France, has been ill with measles.

Some of our nurses have been taking bicycles over from England for use in France, as the French manufacturers are too busy making munitions of war to manufacture bicycles.

We hear from one of our graduates at No. 3 General Hospital (McGill) that a bomb fell on the hospital there and wounded a patient. Our nurses are not out of the danger zone according to these reports.

Misses Forbes, Upton and Holland, are stationed at a hospital two miles out of Salonika. Miss Upton is in charge of the operating room, while each of the others are in charge of wards. They find everything much more satisfactory than at Lemnos, where they were formerly

stationed. After leaving the latter place they were given four weeks' leave at Cairo, where a hotel was commandeered by the British for the nurses. Here all enjoyed themselves, taking trips to outside places and seeing many interesting sights.

The Laval University Unit has been taken over by the French Government, and is being settled at St. Cloud, in France. After arriving in England, the sisters were sent to different hospitals for a time before reorganizing in France. Twelve M. G. H. nurses are with the unit.

Miss Tedford, of the staff in the S. O. R., has been spending a few weeks at Waterbury Inn, in Vermont.

Miss Livingstone, Superintendent of Nurses, Montreal General Hospital, has been spending some time at her summer home in the Laurentian Mountains, at Val Morin, Que.

Miss Cowan returned after a two months' trip to New York and Bermuda.

Miss Frankie Reed, who is Assistant Superintendent of a hospital at Wilmington, Del., is now on a holiday at her home in Montreal.

Miss E. J. Dewar, Class '16, has gone to her home in Campbellton, N.B., for holidays.

Miss Outerson, Class '15, has been lately engaged on the S. O. R. staff to fill the position vacated by Miss Patterson, who has taken up private nursing.

Miss Wheeler, Class '16, has filled Miss MacDougall's place, who has lately gone overseas.

Miss Mary McLeod, Class '16, has charge of the Diet Kitchen for the summer.

The following are a list of recent graduates: Misses Wheeler, France, McCallum, G. Holland, Gillespie, Miller, J. Kennedy, May and Fuller.

Miss C. Todd, Class '14, has recently taken charge of the hospital in connection with the new British munitions plant, at Verdun, Que. Miss Todd had charge of the operating rooms at the Delaware Hospital, Wilmington, Delaware, during the past year.

Misses Sargent and Pyke have been taken on the staff at the Military Hospital on St. Matthew Street, the accommodation being given by the Grey Nunnery. This hospital is conducted on the same basis as an overseas hospital, nurses all in same uniform, etc.

Misses Winnifred Brown and Bagshaw, of Lavall Unit, spent a night at No. 3 General Hospital (McGill) at Boulogne, France, on their way to St. Cloud, in France.

Misses Loggie, Watting and Dickie, are on two weeks leave from McGill Hospital in France. The former is in the south of England, and the two latter in Scotland. The sisters' leaves have been extended from ten days to two weeks, in future.

The following extracts from a letter received from Miss Cotton, graduate of the R. V. H., Montreal, who is now in the Anglo-Russian Hospital, Petrograd, giving an account of the opening of that institution, will, we are sure, be interesting to our readers.

Petrograd, Jan. 25, 1916.

"The first few days we just worked in the linen room, unpacking the stores as they arrived, and then on Tuesday morning the Matron allotted our respective wards to us, which caused great excitement. I have been put in charge of the biggest ward—it probably is not the most important, but I like it the best, and will try to describe it.

"It was evidently once the ball room, a huge, almost square room; the walls and ceiling are very elaborate, white plaster, and a boarding has been put up about five feet all the way around the sides; otherwise it is just left as it was, a beautiful parquet floor; on one side huge windows looking into a courtyard, but fortunately on the side that gets all the sun; on the other side large mirrors, at one end a small alcove, evidently used for the orchestra. This has been turned into a tiny chapel, and the principal ikon hangs there with a reading desk below it, and to one side a candle stand: the men will come there morning and evening, in fact all the time, to say their prayers. It is also to have a couple of large palms, so makes quite a 'show ward' of the place, apart from that it is nice to have the chapel there, and the different forms of devotion are most interesting to watch. There are about eight huge gold chandeliers, and as they had not been cleaned for seven years (when the palace was last used for the marriage of some Princess) we had a great time the last few days cleaning them, hundreds of candles, which meant little glass cups and the electric bulbs to wash—all around the walls in the plaster designs; vines with candles are between all the windows and mirrors. It was a big bit of work but amply repaid us: the room looks lovely with all the lights on.

"We are to have about seventy beds in there, and counting myself there are three Sisters and one V. A. D. Russian orderlies, but I don't know how many; however, you need several to make up for one real one; they take things so casually, are very willing but slow. They are called 'Sanitars' and are men usually from Convalescent Hospitals, who can work, and they are under the Russian Red Cross, so you see they are all soldiers. They wear a khaki-colored uniform, a loose, blousy jacket belted in, on their shoulder straps a red cross, baggy trousers and high black boots. Many of them have black and orange ribbons; so many of the soldiers here have at least five or six medals. I think they are even given when a man is severely wounded.

"Lady Sybil Grey was presented with a very handsome ikon the other day, made in the seventeenth century; it is to be hung in the hospital, but for her afterwards. It was given by several men of the Russian Red Cross who have been interested and working for our hospital.

"February 2nd. Our hospital was really opened and blessed yesterday, so we are ready now to take in patients at any time, and hear rumors of getting some this week. All the hospitals in Petrograd have been empty, because refugees flooded into Petrograd, and naturally the food supply became rather scarce, not because there is a shortage in Russia anywhere, but on account of the trouble they have getting it here from other places, on account of the poor railways, on which there is awful congestion. However, more wounded are being sent in now and the refugees sent to the country places.

"I must now tell you all about the opening—splendid photographs were taken and are to appear in the papers. I suggested to Lady Sybil that she send a set to the papers in Canada, so I think she will. I always keep it well to the fore what a handsome gift Canada gave. The hospital looked lovely, and especially my ward. As the chapel is there the ceremony was held in if. At two-thirty we all assembled; the Sisters all in white, the V. A. D's in dark blue dresses, white aprons with a red cross in the front of their bibs, which looks most effective, white caps like ours, so you can imagine that my blue dress and apron quite stood out; and as I can claim no further honor in connection with it, except keeping my buttons very shiny and filling it amply, I will tell you that it was very much admired by every one, the Empress and the two young Princesses included. The little choir boys and men were there from one of the churches, about fifty of them, and picture them all with their little shaven heads. The doctors in khaki, the matron in her grey crepe-de-chine, with white cap, cuffs and collar. All the uniforms from the British Embassy, the Russian Red Cross officials in theirwonderful uniforms and covered with medals and honors, the priests and the High Priest in his gorgeous robe of cloth of gold and mitre thickly jewelled with diamonds and emeralds—you will see the wonderful candelabra in the photo, and with seven hundred and fifty electric lights all lighted, you can imagine how brilliant it all looked.

"At 3 p. m. the Dowager Empress arrived; walked down the room alone, followed by the two Princesses, Olga and Tatiana, both dressed alike in plain terra cotta colored suits with ermine toques, with big white ospreys on one side, huge ermine muffs, soft white blouses, rather open at the neck, black velvet bands around their throats, diamond ear-rings; one had a string of pearls, the other a diamond pendant—both delightful, so bright and natural. I was presented to the Empress and she was very nice; she looked quite like Queen Alexandra."

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BIRTHS

On May 20, 1916, at 293 Wright Avenue, Toronto, to Mr. and Mrs. James Beattie (Miss J. Beyers), a daughter (Catherine Mary).

At Dundee, Que., on February 25, 1916, to Mr. and Mrs. Fraser, a son. Mrs. Fraser (Templeton) is a graduate of Montreal General Hospital, Class '10.

In Owen Sound, on April 5, 1916, to Capt. and Mrs. Angus McKay, a daughter. Mrs. McKay (Miss Ethel McInnis), is a graduate of the Owen Sound G. & M. Hospital, Class '13.

MARRIAGES

On January 10, 1916, at Brandon, Man., Miss Edith I. Rook, Graduate of Brandon General Hospital, Class '15, to Rev. A. C. Hill, Secretary Y. M. C. A., Brandon.

At Regina, Sask., on April 24, 1916, Miss Kathleen M. Black, Graduate of Brandon General Hospital, 'Class '13, to Mr. Frank Reed of Brandon.

At Winnipeg, Man., on April 26, 1916, Miss Catherine Ferguson Dunn, graduate of Brandon General Hospital, Class '12, to Mr. Archibald S. Hoar, of Loverna, Sask.

At Auburn, West Kilbride, Scotland, on April 5, 1916, James Ingram MacArthur, M.D., of West Kilbride, to Lieut. Barbara Lamont, C.A.M., Graduate of Royal Victoria Hospital, Montreal, Class '99.

At Toronto, on May 18, 1916, Miss Evelyn O'Donnell, graduate of St. Michael's Hospital, Toronto, Class '15, to Mr. John Clarke, C.E., Calgary.

On June 10, 1916, at Toronto, Miss Agnes Godbold, graduate of Toronto General Hospital, Class '12, to Mr. Arthur Morton Brown, of Toronto.

On June 14, 1916, at Toronto, Miss Mary J. Dunbar, graduate of Toronto General Hospital, Class '13, to Dr. Arthur Wesley Knox, of Toronto.

DEATHS

On June 1, 1916, at Vancouver, B. C., Mrs. Ellen Maud Chambers (nee Campbell), who was a graduate of Toronto General Hospital.

Miss Margaret O'Leary, Graduate of St. Michael's Hospital, Toronto, Class '01, of Pneumonia, in Roosevelt Hospital, New York, in February.

On May 15, 1916, at St. Mary's, Ontario, Miss Jean Carr, Graduate of G. & M. Hospital, Collingwood, Ont, 'Class '01.

At Lethbridge, Alberta, on May 29, 1916, Marie Antoinette Valade, Class of '12, R.V.H., Montreal, wife of Dr. Louis Roy.

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Studies in Ethics for Nurses. By Charlotte A. Aikens, formerly Superintendent of Columbia Hospital, Pittsburg, and of the Iowa Methodist Hospital, Des Moines; formerly Director of Sibley Memorial Hospital, Washington, D.C. 12 mo. 320 pages. Cloth, $1.75 net. W. B. Saunders Company, Philadelphia and London. The J. F. Hartz Co., Limited, Toronto, Ontario. An excellent and very practical work on this most important subject.

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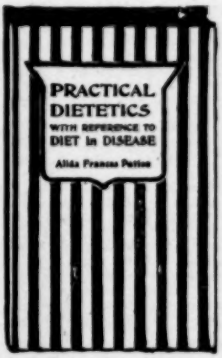

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By V. E. Taplin.

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The foot is the only part of the body we intentionally deform, and for what purpose? We are believed to be fully complying with the dictates of fashion if our girl of, say, 10 years is using a broad low heel, but as the years are added, the heels grow in height, the toes are trimmed off at the sides until we have a deformed instrument of torture not surpassed or outdone in any country—so far as we can learn.

When will our leading men and women realize that the shoe should fit easily, and in the same careful manner as coats and hats, and not be the means of warping and twisting our feet into a useless mass of bones and flesh? Will you please compare the strained mincing gait of the high-heeled, narrow-toed girl, with the easy, graceful swing of the low-heeled, room-for-the-toes-girl. That mincing gait and high heel has more to do with "nervous conditions" than most think.

If women wish to take the place of men with equal efficiency, it will be necessary for them to adopt another and more sensible style of foot wear—real footwear, and not foot millinery. Education to admire normal condition in the feet as in other parts of the body is all we need. I suggest it start in schools.

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Graduate Nurses wishing to do private duty will find at Miss Ryan's Home for Graduate Nurses (connected with one of the largest private sanatoriums in the city) a splendid opportunity to become acquainted and established in their profession. Address 106 West 61st Street, New York City. Phone Columbus 7780-7781.

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